# Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 1 of 48

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Cynthia First name  L. Middle name  Orander  Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5008	

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 2 of 48

Case number (if known)

Debtor 1 Cynthia L. Orander

		About Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)  EINs			
		EINs	EIN	s		
5.	Where you live		If D	ebtor 2 lives at a different address:		
		2807 Ridgeway Avenue Rockford, IL 61101 Number, Street, City, State & ZIP Code	Nur	nber, Street, City, State & ZIP Code		
		Winnebago County	Cou	unty		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If D	ebtor 2's mailing address is different from yours, fill it nere. Note that the court will send any notices to this ling address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Nur	mber, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Entered 08/24/16 11:00:52 Desc Main Page 3 of 48 Case 16-82012 Doc 1 Filed 08/24/16

Document Case number (if known) Debtor 1 Cynthia L. Orander

Par	Tell the Court About	our Ba	ınkruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Chapter 7						
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		■ Ch	apter 13					
8.	How you will pay the fee		I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's chorder. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card a pre-printed address.					
						this option, sig	n and attach the Applica	ation for Individuals to Pay
			ŭ	e in Installments (Office t my fee be waived (	,	this option only	if you are filing for Char	oter 7. By law, a judge may,
			but is not requapplies to you	uired to, waive your fe or family size and you	ee, and may do so are unable to pay	only if your inco	ome is less than 150% of	of the official poverty line that this option, you must fill out
9.	1 NO.							
	bankruptcy within the last 8 years?	■ Yes	S.					
			District	This District	When	5/22/14	Case number	14-81644
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.					
			Debtor				Relationship to y	rou
			District		When		Case number, if	known
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
11.	Do you rent your	□ No.	Go to li	ne 12.				
	residence?	■ Yes	Has yo	ur landlord obtained a	an eviction judgme	nt against you	and do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial St</i> bankruptcy petition.	atement About an	Eviction Judgm	nent Against You (Form	101A) and file it with this

Debtor 1 Cynthia L. Orander Document Page 4 of 48 Case number (if known)

art	3: Report About Any Bu	sinesses `	You Own	as a Sole Proprieto	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busin	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	te & ZIP Code
	it to this petition.		Check	the appropriate box	ox to describe your business:
				Health Care Busine	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broker	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can se deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).			
	For a definition of small	No.	I am n	ot filing under Chapt	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is t	he hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			the property?	Number, Street, City, State & Zip Code

Debtor 1 Cynthia L. Orander Page 5 of 48 Case number (if known)

### Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 6 of 48 Case number (if known) Debtor 1 Cynthia L. Orander Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million

### Part 7: Sign Below

#### For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Cynthia L. Orander

Cynthia L. Orander

Signature of Debtor 2

Signature of Debtor 1

Executed on August 22, 2016

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Cynthia L. Orander Page 7 of 48 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeffry A	Dahlberg Attorney for Debtor	Date	August 22, 2016 MM / DD / YYYY
Jeffry A Da	,		
Printed name			
Balsley & D	Dahlberg		
Firm name			
5130 North	Second Street		
Loves Park	, IL 61111		
Number, Street,	City, State & ZIP Code		
Contact phone	(815) 877-2593	Email address	www.balsleylawoffice.com
6206776			
Bar number & St	ate		

		1700:11111	<u>-: 11 Paue 8 01 48 </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Cynthia L. Orande	r		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				] Che
				ame

# Check if this is an amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,725.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,725.00
Paı	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	4,426.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	9,226.19
	Your total liabilities	\$	13,652.19
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,858.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,597.00
Paı	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bounded purpose "141 U.S.C. \$ 101(0). Fill out lines 9.00 for debt by a second purpose 30 U.S.C. \$ 150	a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Desc Main Entered 08/24/16 11:00:52 Case 16-82012 Doc 1 Filed 08/24/16 Document

Page 9 of 48 Case number (if known) Debtor 1 Cynthia L. Orander

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

3,532.83

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,426.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	4,426.00

		Document	Page 10 of 48		
Fill in this	information to identify your case a	and this filing:			
Debtor 1	Cynthia L. Orander	Middle Name	Last Name		
Debtor 2 (Spouse, if filin	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the: NOR	THERN DISTRICT OF ILLI	NOIS		
Case numb	per		_		☐ Check if this is an
					amended filing
Official	Form 106A/B				
Sched	dule A/B: Propert	У			12/15
hink it fits b	gory, separately list and describe items est. Be as complete and accurate as p If more space is needed, attach a sepa y question.	ossible. If two married people	le are filing together, both are	e equally responsible for su	upplying correct
Part 1: Des	scribe Each Residence, Building, Land	, or Other Real Estate You O	wn or Have an Interest In		
. Do you ov	vn or have any legal or equitable intere	est in any residence, building	, land, or similar property?		
■ No. Go	to Part 2.				
☐ Yes. W	/here is the property?				
Part 2: Des	scribe Your Vehicles				
someone els	n, lease, or have legal or equitable se drives. If you lease a vehicle, also ns, trucks, tractors, sport utility ve	report it on Schedule G: E			
3.1 Make	Varia	Who has an interest in th	ne property? Check one	the amount of any secure	laims or exemptions. Put ed claims on Schedule D:
Mode Year		■ Debtor 1 only □ Debtor 2 only		Creditors Who Have Class  Current value of the	ims Secured by Property.  Current value of the
• • •	oximate mileage: 180,000 r information:	☐ Debtor 1 and Debtor 2 ☐ At least one of the deb	,	entire property?	portion you own?
		Check if this is comm	nunity property	\$1,700.00	\$1,700.00
Examples  No □ Yes  Add the pages y  Part 3: Des	aft, aircraft, motor homes, ATVs and some second with the control of the portion you over a doubt a straight of the portion you over the control of the portion you over the portion you have attached for Part 2. Write you over the portion you have attached for Part 2. Write you over the portion you have attached for portion you have a portion you have	atercraft, fishing vessels, so vn for all of your entries f that number here	nowmobiles, motorcycle acc	entries for	\$1,700.00  Current value of the portion you own?  Do not deduct secured
	old goods and furnishings es: Major appliances, furniture, linens	s china kitchenware			claims or exemptions.
⊏xample	zs. iviajoi appiiances, turniture, iinėns	s, china, kitchenware			

□ No
Official Form 106A/B Schedule A/B: Property page 1

	Case 16-82012	Doc 1	Filed 08/24/16 Document	Page 11 of 48	
Debtor 1	Cynthia L. Orander		2004	Case number (if	known)
Yes.	Describe				
	Misc. h	ousehold go	oods and furnishings		\$500.00
□ No				oment; computers, printers, scanners; r	nusic collections; electronic devices
	1 TV 1 Cell F 1 Lapto				\$800.00
Examp ■ No	ibles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stam	ວ, coin, or baseball card collections;
Examp.  No	nent for sports and hobbie les: Sports, photographic, e musical instruments  Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis; c	anoes and kayaks; carpentry tools;
■ No	ms  ples: Pistols, rifles, shotgun  Describe	s, ammunitio	n, and related equipmen	t	
□ No	es uples: Everyday clothes, furs Describe	s, leather coat	s, designer wear, shoes	, accessories	
	Clothin	g and perso	nal items		\$500.00
■ No □ Yes.  13. <b>Non-fa</b> Exam  No	ples: Everyday jewelry, cos  Describe  arm animals  ples: Dogs, cats, birds, hors		engagement rings, wed	ding rings, heirloom jewelry, watches, ç	jems, gold, silver
14. <b>Any o</b> t	Describe  ther personal and househ  Give specific information	-	u did not already list, i	ncluding any health aids you did not	list
	the dollar value of all of y art 3. Write that number h			ny entries for pages you have attach	ed \$1,800.00
	escribe Your Financial Assets wn or have any legal or ec		est in any of the follow	ring?	Current value of the
•	,		•	•	portion you own?

Do not deduct secured claims or exemptions.

page 2

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Page 12 of 48

Case number (if known) Document Debtor 1 Cynthia L. Orander 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Credit Union MemberAlliance \$25.00 Savings 17.1. Credit Union MemberAlliance \$200.00 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Pension Interest in U.S. Veterans Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them...

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

☐ Yes.....

		Case 16-8202	12 [	oc 1	Filed 08/24/16 Document	Entered 08/24/16 11:00:52 Page 13 of 48	Desc Main
De	btor 1	Cynthia L. Orande	er		Document	Case number (if known)	
ļ	<i>Examp</i> ■ No	oles: Internet domain n	ames, w	ebsites, p	ets, and other intellectu proceeds from royalties a	nal property and licensing agreements	
ļ	⊔ Yes.	Give specific informat	ion abou	t them			
ı	<i>Examp</i> ■ No	es, franchises, and or ples: Building permits, or Give specific informat	exclusive	e licenses		n holdings, liquor licenses, professional licens	es
Мо	ney or	property owed to you	1?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you					
_	■ No □ Yes.	Give specific information	on abou	them, inc	cluding whether you alre	ady filed the returns and the tax years	
ı	Examp ■ No	support  bles: Past due or lump  Give specific information		nony, spo	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
ļ	Examp ■ No	amounts someone ovo bles: Unpaid wages, dis benefits; unpaid lo Give specific informat	sability ir oans you			efits, sick pay, vacation pay, workers' comper	nsation, Social Security
		ts in insurance policibles: Health, disability,		surance; h	nealth savings account (l	HSA); credit, homeowner's, or renter's insurar	nce
	_	Name the insurance co	ompany Compan		olicy and list its value.	Beneficiary:	Surrender or refund value:
ı	If you a someo		ı living tr		a someone who has die ot proceeds from a life in	ed surance policy, or are currently entitled to rece	eive property because
ļ	<i>Examp</i> □ No -	against third parties bles: Accidents, employ Describe each claim	ment di	er or not sputes, in	you have filed a lawsui surance claims, or rights	it or made a demand for payment to sue	
					ial Medial Claim vs. D & Associates Attorne		Unknown
ı	No	contingent and unliqu		claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
ı	No	nancial assets you did		eady list			

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 14 of 48

Deb	or 1 Cynthia L. Orander		Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, inclu for Part 4. Write that number here			\$225.00
Part	5: Describe Any Business-Related Property You Own or Have an Ir	nterest In. List any real est	ate in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-re	elated property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property No. 1 If you own or have an interest in farmland, list it in Part 1.	You Own or Have an Intere	est In.	
16. <b>[</b>	o you own or have any legal or equitable interest in any far	m- or commercial fishi	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That	You Did Not List Above		
	Do you have other property of any kind you did not already I Examples: Season tickets, country club membership  No	list?		
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$1,700.00		
57.	Part 3: Total personal and household items, line 15	\$1,800.00		
58.	Part 4: Total financial assets, line 36	\$225.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62	Total personal property. Add lines 56 through 61	\$3,725,00	Copy personal property to	tal \$3,725,00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$3,725.00

		17000000	111 FAUE 13 01 40	)
Fill in this inform	ation to identify your	case:		
Debtor 1	Cynthia L. Orande	r Middle Name	Last Name	
Debtor 2	i iist ivaille	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Ched	ck only one box for each exemption.	
Misc. household goods and furnishings Line from <i>Schedule A/B</i> : 6.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Ellio II oli I ochedale A.B. G. I			100% of fair market value, up to any applicable statutory limit	
1 TV 1 Cell Phone	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
1 Laptop Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit	
Clothing and personal items Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Life from Schedule A.B. 11.1			100% of fair market value, up to any applicable statutory limit	
Credit Union Checking: MemberAlliance	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line nom Schedule A.B. 11.2			100% of fair market value, up to any applicable statutory limit	
Pension: Interest in U.S. Veterans Line from Schedule A/B: 21.1	Unknown		100%	735 ILCS 5/12-1006
Line from Scriedule Arb. 21.1			100% of fair market value, up to any applicable statutory limit	

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 16 of 48 Debtor 1 Cynthia L. Orander Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Potential Medial Claim vs. Dr. Tunca 735 ILCS 5/2-1716 Unknown Ed Fox & Associates Attorney Grinnalds 100% of fair market value, up to Line from Schedule A/B: 33.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Fill in this information to identify your case:					
Debtor 1	Cynthia L. Orande	r Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

			Documer	nt Page 18 of 4	48	_	
Fil	I in this informa	ation to identify your ca	se:				
De	ebtor 1	Cynthia L. Orander					
		First Name	Middle Name	Last Name			
	ebtor 2						
(Sp	ouse if, filing)	First Name	Middle Name	Last Name			
Un	nited States Banl	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
<u></u>	an aumhar						
	ase number		<del></del>			☐ Check	c if this is an
						_	ded filing
<b>~</b> 4	(4:a:a  □aa	400E/E					
	ficial Form		o Have Unsecu	rad Claima			12/15
				red Claims RIORITY claims and Part 2 fo	ar araditara with NON	IDDIODITY eleime I	
Sch Sch eft. nan	nedule G: Executor nedule D: Creditor . Attach the Conti ne and case numl	ory Contracts and Unexpire rs Who Have Claims Secur nuation Page to this page.	ed Leases (Official Form 10 ed by Property. If more spa If you have no information	Also list executory contract 66). Do not include any creace is needed, copy the Part to report in a Part, do not f	ditors with partially s you need, fill it out,	secured claims that a number the entries i	are listed in in the boxes on the
1.	Do any creditors	s have priority unsecured	claims against you?				
	☐ No. Go to Par	rt 2.					
	Yes.						
2.	identify what type possible, list the Part 1. If more the	e of claim it is. If a claim has claims in alphabetical order an one creditor holds a parti	both priority and nonpriority a		nd show both priority a o priority unsecured cl	and nonpriority amour aims, fill out the Conti	nts. As much as inuation Page of
					Total claim	Priority amount	Nonpriority amount
2.1	Internal R	Revenue Service	Last 4 digits of	account number	\$4,426.00	\$4,426.00	\$0.00
	P.O. Box Philadelp	ed Insolvency Operatio 7346 hia, PA 19101-7346	ON When was the d	lebt incurred?		-	
		eet City State Zlp Code	-	ou file, the claim is: Check a	Ill that apply		
	Who incurred	the debt? Check one.	☐ Contingent				
	Debtor 1 on	ly	☐ Unliquidated				
	Debtor 2 on	ly	☐ Disputed				
	Debtor 1 an	d Debtor 2 only	Type of PRIORI	TY unsecured claim:			
	☐ At least one	of the debtors and another	☐ Domestic sup	port obligations			
	☐ Check if thi	is claim is for a communit	y debt Taxes and ce	rtain other debts you owe the	government		
	Is the claim su	bject to offset?	☐ Claims for de	ath or personal injury while yo	u were intoxicated		
	■ No		☐ Other. Specif	у			
	☐ Yes		•	income taxes for 20	13, 2014, 2015		-
Pa	rt 2: List All	of Your NONPRIORITY	Unsecured Claims				
3.		s have nonpriority unsecu					
	☐ No. You have	nothing to report in this par	. Submit this form to the cou	rt with your other schedules.			
	Yes.						
4.	unsecured claim,	, list the creditor separately f	or each claim. For each clain	r of the creditor who holds n listed, identify what type of c lf you have more than three n	laim it is. Do not list cla	aims already included	l in Part 1. If more

Total claim

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 19 of 48

Debio	Cynthia L. Orander	Case number (if know)	
4.1	Alliance Pathology Consultants  Nonpriority Creditor's Name	Last 4 digits of account number	\$175.49
	8085 Rivers Avenue, #100 Charleston, SC 29406-9239	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.2	Green Bank N.A. d/b/a MyPay Nonpriority Creditor's Name	Last 4 digits of account number	\$1,400.00
	4000 Greenbriar Houston, TX 77098	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify loan	
4.3	James Gerdes	Last 4 digits of account number	\$2,500.00
	Nonpriority Creditor's Name 2807 Ridgeway Avenue Rockford, IL 61101	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify loan	

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 20 of 48

Debio	Cynthia L. Orander	Case number (if know)	
4.4	Malcom S. Gerald & Associates, Inc.	Last 4 digits of account number	\$750.00
	Nonpriority Creditor's Name P.O. Box 1259	When was the debt incurred?	
	Sept. #126943		
	Oaks, PA 19456  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damins. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Collections for St. Alexius Medical Center, and other misc. accounts	
4.5	McCarthy, Burgess & Wolfe	Last 4 digits of account number	\$882.25
	Nonpriority Creditor's Name The MB&W Building	When was the debt incurred?	
	26000 Cannon Road		
	Bedford, OH 44146		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collections for Verizon Wireless, and other misc. accounts	
4.6	Opportunity Financial LLC	Last 4 digits of account number	\$3,008.95
	Nonpriority Creditor's Name 11 E. Adams Street, Suite 501 Chicago II. 60603	When was the debt incurred?	
	Chicago, IL 60603  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	■ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify loan	

Debtor 1	Cynthia L. Orander	Document Pa	age 21 of 4	-8 number (if know	v)	
	RMH Pathologists LTD  Nonpriority Creditor's Name  No Professional Billing  No Weaver Road # D	Last 4 digits of account When was the debt incur				\$509.50
	Rockford, IL 61114  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, th	ne claim is: Check	all that apply		
I	Debtor 1 only	☐ Contingent				
[	Debtor 2 only	☐ Unliquidated				
[	Debtor 1 and Debtor 2 only	☐ Disputed				
[	At least one of the debtors and another	Type of NONPRIORITY u	insecured claim:			
[	☐ Check if this claim is for a community	☐ Student loans				
-	lebt	Obligations arising out	of a separation ag	reement or dive	orce that you did not	
_	s the claim subject to offset?  No	report as priority claims  Debts to pension or pro	ofit charing plane	and other simils	ar dobte	
				and other Simila	ai debis	
	Yes	Other. Specify med	icai			
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed				
is trying have m	page only if you have others to be notified to collect from you for a debt you owe to so to than one creditor for any of the debts the for any debts in Parts 1 or 2, do not fill out	someone else, list the original c nat you listed in Parts 1 or 2, list	reditor in Parts 1	or 2, then list	the collection agency	here. Similarly, if you
Name and	I Address	On which entry in Part 1 or Part	2 did you list the o	riginal creditor?	?	
	Revenue Service	Line 2.1 of (Check one):	■ Part 1: 0	Creditors with F	Priority Unsecured Clair	ms
	9th Street, Room 493 nd, OH 44199		☐ Part 2: (	Creditors with N	Nonpriority Unsecured	Claims
Cieveiai	iu, 011 44 199	Last 4 digits of account number				
Part 4:	Add the Amounts for Each Type of L	Jnsecured Claim				
	e amounts of certain types of unsecured cl unsecured claim.	aims. This information is for sta	atistical reporting	purposes only	y. 28 U.S.C. §159. Add	I the amounts for each
				Т	otal Claim	
To clai	6a. Domestic support obligationtal ms	ns	6a.	\$	0.00	

Tatal	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b. 6c.	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	6b. 6c.	\$ 	4,426.00 0.00
	6d. 6e.	Other. Add all other priority unsecured claims. Write that amount here.  Total Priority. Add lines 6a through 6d.	6d. 6e.	\$ \$	4,426.00
Total claims	6f.	Student loans	6f.	\$	Total Claim 0.00
from Part 2	6g. 6h. 6i.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Add all other nonpriority unsecured claims. Write that amount here.	6g. 6h. 6i.	\$ \$ \$	0.00 0.00 9,226.19
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	9,226.19

		1210000	$\cdots$	
Fill in this infor	mation to identify your	case:		
Debtor 1	Cynthia L. Orande	er Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del></del>
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>

		Docume	ent Page 23 d	NT 48	
Fill in this i	nformation to identify your				
Debtor 1	Cynthia L. Orande	r			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)	er				☐ Check if this is an
					amended filing
Official	Form 106H				
	ıle H: Your Cod	obtore			40/45
Scriedi	ile n. Your Cou	epiois			12/15
	and case number (if known) ou have any codebtors? (If			as a codebtor.	
☐ Yes					
	in the last 8 years, have you, , California, Idaho, Louisiana,				states and territories include
	Go to line 3.				
⊔ Yes.	Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	olumn 1: Your codebtor ame, Number, Street, City, State and Zl	P Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D. line	
	ame			☐ Schedule E/F, lir	
				☐ Schedule G, line	
N	umber Street				
Ci	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			☐ Schedule E/F, lir	
				☐ Schedule G, line	
N	umber Street			_	
	ity	State	ZIP Code		

# Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 24 of 48

Fill	in this information to identif	y your ca	se:								
Del	btor 1 Cynth	nia L. Or	ander			_					
	btor 2					_					
Uni	ited States Bankruptcy Cou	rt for the:	NORTHERN DISTRIC	T OF ILLINOIS		_					
	se number						□ A		ed filing ent showin	g postpetition ollowing date:	
0	fficial Form 106	<u>l</u>					M	IM / DD/ Y	YYY		
S	chedule I: Your	r Inco	ome								12/1
sup spo atta	as complete and accurate plying correct information use. If you are separated a ch a separate sheet to this period and the complete that t	n. If you a and you s form. C	are married and not filing wi	ng jointly, and your th you, do not inclu	spouse i	is liv mati	ing with on about	you, inclu your spo	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.			Debtor 1		Debtor 2	or non-fi	ling spouse			
	If you have more than one attach a separate page w		Employment status	■ Employed				☐ Emplo	•		
	information about additional employers.			☐ Not employed				☐ Not e	mployed		
			Occupation	Advanced Medic	al Supp	ort A	∖st				
	Include part-time, season self-employed work.	ai, oi	Employer's name	Depatrment of V	Depatrment of Veterans						
	Occupation may include s or homemaker, if it applie		Employer's address	Freeport, IL 610	32						
			How long employed the	nere? 14 year	rs			_			
Pai	rt 2: Give Details Ab	out Mon	thly Income								
	imate monthly income as ouse unless you are separate		te you file this form. If y	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your noi	n-filing
	ou or your non-filing spouse e space, attach a separate :			embine the information	n for all e	empl	oyers for	that perso	n on the li	nes below. If	you need
							For Dek	otor 1		btor 2 or ng spouse	
2.	List monthly gross wage deductions). If not paid m				2.	\$	3	,484.00	\$	N/A	
3.	Estimate and list month	ly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income	. Add lin	e 2 + line 3.		4.	\$	3,48	34.00	\$	N/A	

# Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 25 of 48

Deb	tor 1	Cynthia L. Orander	_	С	ase	number (if known)				
					For	Debtor 1	For	Debtor	2 or	
	Con	y line 4 here	4.		Φ.	3,484.00	nor \$	n-filing s	pouse N/A	
			4.		Ψ_	3,404.00	Ψ_		IN/A	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	586.00	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$_	28.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.		\$_	0.00	\$_		N/A	_
	5e.	Insurance	5e.		\$	1,012.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$_	0.00	\$_		N/A	
	5g.	Union dues	5g.		\$_	0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	5h.	.+	\$_	0.00	+ \$_		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$_	1,626.00	\$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$_	1,858.00	\$_		N/A	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.		\$_	0.00	\$_		N/A	
	8b.	Interest and dividends	8b.		\$	0.00	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	\$_		N/A	
	8d.	Unemployment compensation	8d.		\$	0.00	\$		N/A	_
	8e.	Social Security	8e.		\$	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	0.00	\$		N/A	
	8g.	Pension or retirement income	 8g.		\$_	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h.	+	\$	0.00	+ \$ _		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	_	0.00	\$_		N/	4
10	Cal	culate monthly income. Add line 7 + line 9.	10.	Φ.		1,858.00 + \$		N/A		1,858.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Φ_		1,000.00		IN/A	<b>=</b>   <b>\$</b>	1,000.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule use contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe						e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	1,858.00
									Combi month	ned ly income
13.	Do :	you expect an increase or decrease within the year after you file this form	?							,
	_	No. Yes Explain:								

# Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 26 of 48

Fill in this	s information to identify yo	our coee:			I		
Debtor 1	Cynthia L. Or	ander			Che	eck if this is:  An amended filing	
Debtor 2						A supplement show	wing postpetition chapter
(Spouse, i	if filing)					13 expenses as of	the following date:
United Sta	ates Bankruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case num (If known)							
Offici	al Form 106J						
Sche	edule J: Your	Expen	ses				12/1
Be as co informat number	omplete and accurate as tion. If more space is ne (if known). Answer eve	possible. eded, atta ry question	If two married people ar				
Part 1:	Describe Your House his a joint case?	hold					
<b>=</b> 1	No. Go to line 2. Yes. <b>Does Debtor 2 live</b>	in a separa	ate household?				
	□ No	·	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Del	btor 2.	
2. <b>Do</b>	you have dependents?	■ No					
	not list Debtor 1 and otor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
Do	not state the						□ No
dep	endents names.						Yes
							□ No
						<u> </u>	☐ Yes ☐ No
							☐ Yes
							□ No
							☐ Yes
exp	your expenses include enses of people other t irself and your depende	han $_{\square}$	No Yes				
	es as of a date after the	our bankrı	y Expenses ıptcy filing date unless y y is filed. If this is a supp				
the value			government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
	rental or home owners ments and any rent for th		ses for your residence. In	nclude first mortgag	e 4.	\$	0.00
, ,	ot included in line 4:	. J. 5 a. 1 a 6					
					40	<b>c</b>	0.00
4a. 4b.	Real estate taxes Property, homeowner's	s or renter'	s insurance		4a. 4b.	·	0.00
40. 4c.	Home maintenance, re				40. 4c.	·	0.00
4d.	Homeowner's associa				4d.	·	0.00
			ur residence, such as ho	me equity loans	5.		0.00

# Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 27 of 48

6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Childcare and children's education costs Clothing, laundry, and dry cleaning Clothing, laundry, and clothing Clothing, laundry, and cl	
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 1 6d. Other. Specify: 6d. \$   7. Food and housekeeping supplies 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 2  10. Personal care products and services 10. \$ 1  11. Medical and dental expenses 11. \$ 1  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 1  14. Charitable contributions and religious donations 14. \$ 1  15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 17e. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other spyments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. S 7. Food and housekeeping supplies 7. \$ 5. Childcare and children's education costs 8. \$ 9. Clothing, laundry, and dry cleaning 9. \$ 20. Personal care products and services 10. \$ 11. \$ 11. \$ 11. Medical and dental expenses 11. \$ 12. \$ 13. Entertainment, clube, recreation, newspapers, magazines, and books 13. \$ 14. Charitable contributions and religious donations 14. \$ 15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 19. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify:  Food and housekeeping supplies  Childcare and children's education costs  Clothing, laundry, and dry cleaning  Clothing, laundry, and dry cleaning  Personal care products and services  Medical and dental expenses  Clothing, laundry, and dry cleaning  Personal care products and services  Medical and dental expenses  In the standard expenses  In	0.00
6d. Other. Specify:  Food and housekeeping supplies  Childcare and children's education costs  Childcare and children's education costs  Childcare and children's education costs  Clothing, laundry, and dry cleaning  Clothing, laundry, and dry cleaning  Dersonal care products and services  10. \$  11. \$  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  Charitable contributions and religious donations  Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15c. Vehicle insurance. Specify:  15d. \$  15d. \$  15d. \$  15d. \$  15d. \$  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106).  Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	90.00
7. Food and housekeeping supplies 8. Childcare and children's education costs 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 10. Personal care products and services 11. Medical and dental expenses 11. \$ 11. \$ 11. \$ 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 14. Charitable contributions and religious donations 14. \$ 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 20. Personal care products and services 10. Personal care products and services 11. \$ 11. \$ 12. \$ 13. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 14. Charitable contributions and religious donations 14. \$ 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Specify: 17e. Car payments for Vehicle 1 17a. \$ 17b. Car payments for Vehicle 1 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
Clothing, laundry, and dry cleaning Personal care products and services 10. Personal care products and services 11. Medical and dental expenses 11. Medical and dental expenses 11. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 2 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 1 14. Charitable contributions and religious donations 14. \$ 1 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Vour payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	00.00
10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. S 2 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 14. Charitable contributions and religious donations 14. \$ 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
Medical and dental expenses	00.00
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$  Entertainment, clubs, recreation, newspapers, magazines, and books  14. \$  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15c. Vehicle insurance. Specify:  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other specify:  17d. Other payments you make to support others who do not live with you.  Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	25.00
Do not include car payments.  12. \$ 2  Intertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 1  4. Charitable contributions and religious donations  14. \$ 1  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	00.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books 4. Charitable contributions and religious donations 5. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	50.00
4. Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. S  7. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you.  Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. \$  15d. \$  15d. \$  15d. \$  16. \$  17a. Specify:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	00.00
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. S  16d. S  16d. S  17e. S  17e. Car payments for Vehicle 1 17e. Car payments for Vehicle 2 17e. Other. Specify: 17e. Other. Specify: 17e. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	00.00
15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Specify: 15d. Specify: 16. \$  17a. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you. Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
15b. Health insurance 15c. \$ 15c. Vehicle insurance 15c. \$ 15d. Other insurance. Specify: 15d. \$ 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 17b. Car payments for Vehicle 2 17b. \$ 17c. Other. Specify: 17c. \$ 17d. Other. Specify: 17d. \$ 17d. Other. Specify: 17d. \$ 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). \$ 19. Other payments you make to support others who do not live with you. \$ Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
15c. Vehicle insurance 15d. Other insurance. Specify: 15d. S  6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$  7. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S  8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you. Specify: 19.  15d. \$  16. \$  17a. \$  17a. \$  17b. \$  17c. \$  17c. \$  17d. \$  18. \$  Other payments you make to support others who do not live with you. Specify: 19.	0.00
15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  16. \$  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you. Specify: 19.  15d. \$  16. \$  17a. \$  17a. \$  17b. \$  17c. \$  17c. \$  17d. \$  18. \$  Other payments you make to support others who do not live with you. Specify: 19.	0.00
15d. Other insurance. Specify:  15d. \$  16d. \$  16d. \$  17d. \$	32.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  7. Installment or lease payments:  17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Vour payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you.  Specify:  19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you.  Specify:  16. \$  17a. \$  17b. \$  17c. \$  17d. \$  18. \$  9. Other payments you make to support others who do not live with you.  Specify:  19.	3.00
7. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S  8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you.  Specify: 19.  17a. \$ 17b. \$ 17c. \$ 17d. \$ 17d. \$ 18. \$ 18. \$ 18. \$ 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S  8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you. Specify: 19.  17a. \$ 17b. \$ 17c. \$ 17d. \$ 18b. \$ 18c. \$ 18c. \$ 19c. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S  8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you. Specify: 19.  17b. \$  17c. \$  17d. \$  18. \$  9. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S  8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you.  Specify: 18. \$  18. \$  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
17d. Other. Specify:  17d. \$  17d. \$  17d. \$  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).  9. Other payments you make to support others who do not live with you.  Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> .	
8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).  9. Other payments you make to support others who do not live with you.  Specify:  19.  Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> .	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l).  9. Other payments you make to support others who do not live with you.  Specify:  19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
9. Other payments you make to support others who do not live with you.  Specify:  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> .	
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	0.00
20a. Mortgages on other property	0.00
20b. Real estate taxes 20b. \$	0.00
20c. Property, homeowner's, or renter's insurance 20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses 20d. \$	0.00
20e. Homeowner's association or condominium dues 20e. \$	0.00
11. <b>Other:</b> Specify: 21. +\$	0.00
	3.00
22. Calculate your monthly expenses	
22a. Add lines 4 through 21. \$	.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	
22c. Add line 22a and 22b. The result is your monthly expenses.	00
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,8	58.00
	97.00
23c. Subtract your monthly expenses from your monthly income.	
The result is your <i>monthly net income</i> . 23c. \$	61.00
, ,	
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease be	cause of a
modification to the terms of your mortgage?	
■ No.	
☐ Yes. Explain here:	

# Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 28 of 48

Fill in this inf	formation to identify your	case:			
Debtor 1	Cynthia L. Orande	r			
<b>D</b> 1 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)				_	ck if this is an nded filing
	orm 106Dec	on Individual	Dobtorio Sol	a a dula a	
Declar	ation About a	in marviduai	Depior 5 Sci	iedules	12/15
years, or both	n. 18 U.S.C. §§ 152, 1341, 1 Sign Below		,	fines up to \$250,000, or imprisonn	·
Did you	pay or agree to pay some	eone who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes	s. Name of person			Attach Bankruptcy Petition I Declaration, and Signature (	
	enalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	
X /s/ C	Synthia L. Orander		X		
	thia L. Orander ature of Debtor 1		Signature of D	ebtor 2	
Date	August 22, 2016		Date		

# Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 29 of 48

HII	in this inform	nation to identify you	r. 0200:									
Det	otor 1	Cynthia L. Orand	er Middle Name	Last Name								
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name								
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS								
	se number _					check if this is an						
					a	mended filing						
∩f	ficial Fo	rm 107										
			Affairs for Individ	duals Filing for B	ankruptcy	4/16						
info num	rmation. If m	ore space is needed, n). Answer every ques	attach a separate sheet to	this form. On the top of any	equally responsible for sup additional pages, write you							
ган 1.		r current marital statu		Lived Belore								
	☐ Married ■ Not mai											
2.		During the last 3 years, have you lived anywhere other than where you live now?										
	_		•	•								
	■ No □ Yes. Lis	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.										
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there						
<b>3.</b> state					ity property state or territory co, Texas, Washington and W							
	■ No											
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	hedule H: Your Codebtors (O	fficial Form 106H).								
Par	t 2 Explai	n the Sources of You	r Income									
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?						
	□ No ■ Yes. Fil	in the details.										
			Debtor 1		Debtor 2							
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)						
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$24,389.00	☐ Wages, commissions, bonuses, tips							
			☐ Operating a business		☐ Operating a business							

Official Form 107

Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Case 16-82012 Document

Page 30 of 48 Case number (if known) Debtor 1 Cynthia L. Orander

					Debtor 1				Debtor 2		
						of income that apply.		s income e deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December	31, 2015 )	■ Wages	s, commissions, tips		\$30,608.00	☐ Wages, combonuses, tips	nmissions,	
					☐ Opera	ting a business			☐ Operating a	business	
5.	Include and control	de ind other p ings. I	ome regard oublic benef f you are fili	lless of wheth fit payments; ing a joint cas	ner that inco pensions; r se and you	ome is taxable. Ex ental income; inte have income that	amples of rest; divid you receiv	ends; money colle ved together, list it	alimony; child supp	royalties; and ebtor 1.	ecurity, unemployment, d gambling and lottery
				J		·	,		,		
		No Voc 1	Fill in the de	ataile							
	_	103.	III III IIIC GC	italis.							
					Debtor 1 Sources Describe	of income below.	each	s income from source e deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
De	rt 3:	l :a4	Cartain Da	umanta Vau	Mada Dafe	ore You Filed for	Donley	<b>.</b>			
5.	6. Are either Debtor 1's or Debtor  No. Neither Debtor 1 no individual primarily fo				ebtor 2 ha	s primarily cons	umer deb		ots are defined in 11	U.S.C. § 101	(8) as "incurred by an
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.							nd alimony. Also, do				
	•	Yes.				e primarily const I for bankruptcy, d			al of \$600 or more	?	
			■ No.	Go to line 7	·.						
			☐ Yes		ments for c	lomestic support o			nd the total amount opport and alimony.		creditor. Do not nclude payments to an
	Cree	ditor's	s Name and	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	ayment for
7. Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person i a business you operate as a sole proprietor. alimony.				general pa , person in	rtners; relatives of control, or owner	f any gene of 20% or	nt on a debt you o eral partners; partn more of their votin	owed anyone who erships of which you g securities; and a	ou are a gener ny managing	ral partner; corporations agent, including one fo	
	_	No									
			. ,	nents to an in	sider.					_	
Insider's Name and Address					Dates of payme	ent	Total amount	Amount you	Reason fo	r this payment	

Entered 08/24/16 11:00:52 Desc Main Case 16-82012 Doc 1 Filed 08/24/16 Page 31 of 48 Case number (if known) Document

Debtor 1 Cynthia L. Orander

8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.										
	■ No										
	☐ Yes. List all payments to an insider										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name					
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures									
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.										
	■ No □ Yes. Fill in the details.										
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case					
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	foreclosed, garnis	shed, attached	d, seized, or levied?					
	No. Go to line 11.  Yes. Fill in the information below.										
		Deceribe the Drements		Dete		Value of the					
	Creditor Name and Address  Describe the Property  Date  Va  Explain what happened										
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No  Yes. Fill in the details.  Creditor Name and Address		-		action was	amounts from your Amount					
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess			efit of creditors, a					
	☐ Yes										
Par	t 5: List Certain Gifts and Contributions										
13.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	otcy, did you give any gifts	s with a total value	of more than \$60	00 per person	?					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave iifts	Value					
	Person to Whom You Gave the Gift and Address:										
14.	Within 2 years before you filed for bankrup  ■ No  ■ Yes. Fill in the details for each gift or cor		s or contributions	with a total value	of more than	\$600 to any charity?					
	Yes. Fill in the details for each gift or cor Gifts or contributions to charities that tot more than \$600 Charity's Name		ı contributed		s you ributed	Value					
	Address (Number, Street, City, State and ZIP Code)										
Par	t 6: List Certain Losses										

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Case 16-82012 Document Page 32 of 48 Case number (if known)

Debtor 1 Cynthia L. Orander

	or gambling?										
	■ No □ Yes. Fill in the details.										
	how the loss occurred	nclude	the amount that insceed the common that insceed the common that inseed the common that inse	surance has paid. L	ist pending	Date of your loss	Value of property lost				
Pai	t 7: List Certain Payments or Transfers										
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.										
	■ No □ Yes. Fill in the details.										
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment				
17.	Within 1 year before you filed for bankruppy promised to help you deal with your credit Do not include any payment or transfer that you have a supply of the payment of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that you have a supply of the payment of transfer that	tors or	to make payment			or transfer any prope	erty to anyone who				
	Yes. Fill in the details.										
	Person Who Was Paid Address		Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to an transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortg include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.										
	Person Who Received Transfer		Description and	value of	Describe a	any property or	Date transfer was				
	Address Person's relationship to you		property transfe			received or debts	made				
19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p  No Yes. Fill in the details.			ny property to a s	elf-settled tru	ust or similar device	of which you are a				
	Name of trust		Description and	value of the prope	erty transferr	ed	Date Transfer was made				
Pai	t 8: List of Certain Financial Accounts, I	nstrun	nents, Safe Depos	it Boxes, and Stor	age Units						
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.										
	Yes. Fill in the details.										
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		et 4 digits of count number	Type of account instrument	clo	te account was used, sold, oved, or usferred	Last balance before closing or transfer				

Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Case 16-82012 Page 33 of 48 Case number (if known) Document

Debtor 1 Cynthia L. Orander

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No							
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or p  No	lace other than your home within 1	year before you filed for bankruptcy	?				
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
Pai	t 9: Identify Property You Hold or Control for	Someone Else						
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in for someone.								
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pai	t 10: Give Details About Environmental Inform	ation						
	<del></del>							
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, ground						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.					
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environme	ental law?				
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No							
	Yes. Fill in the details.							
	Name of site	Governmental unit	Environmental law, if you	Date of notice				
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		Date of Hotice				

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Page 34 of 48 Document Case number (if known) Debtor 1 Cynthia L. Orander 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Cynthia L. Orander Cynthia L. Orander Signature of Debtor 2 Signature of Debtor 1 Date August 22, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 39 of 48

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In re	Cynthia L. Orander		Case No.	
	•	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	EBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy, o	r agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,600.00
	Prior to the filing of this statement I have received			0.00
	Balance Due		\$	3,600.00
2. \$	5 310.00 of the filing fee has been paid.			
3. 7	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. 7	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	I have not agreed to share the above-disclosed comp	pensation with any other person u	nless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
<b>6.</b> ]	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:			
t c	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credit [Other provisions as needed]  Negotiations with secured creditors to reduce agreements and applications as needed; por liens on household goods.	tement of affairs and plan which r ors and confirmation hearing, and uce to market value; exemption	nay be required; any adjourned hea n planning; prepar	rings thereof; ation and filing of reaffirmation
7. I	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any disch adversary proceeding.	ee does not include the following stargeability actions, judicial lien	service: avoidances, relie	of from stay actions or any other
		CERTIFICATION		
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for p	payment to me for re	epresentation of the debtor(s) in
Aı	ugust 22, 2016	/s/ Jeffry A Dahlberg	a	
	ate	Jeffry A Dahlberg		
		Signature of Attorney Balsley & Dahlberg		
		5130 North Second	Street	
		Loves Park, IL 6111	1	_
		(815) 877-2593 Fa		•
		www.balsleylawoffic	e.com	
		Trance of war firm		

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### **B.** AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

rece is ch reta	The attorney may receive a retainer or other payment before filing the case but may not sive fees directly from the debtor after the filing of the case. Unless the following provision necked and completed, any retainer received by the attorney will be treated as a security iner, to be placed in the attorney's client trust account until approval of a fee application by court.
	The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
(a)	The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
(b)	The retainer will not be held in a client trust account and will become property of the

attorney upon payment and will be deposited into the attorney's general account;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 3600.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$0 toward the flat fee, leaving a balance due of \$3600.00; and \$0 for expenses, leaving a balance due for the filing fee of \$0

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Attorney for the Debtor(s)

3/22/2014 La Olandel

Signed:

Cynthia Orander

Debtor(s)

Do not sign this agreement if the amounts are blank.

## Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Anonyment, Agraga, 46 pt 48

The undersigned hires Balsley & Dahlberg Law Office for representation in a Chapter 13 bankruptcy under the following terms and conditions. I/We have signed and received a copy of the "Court Approved Retention Agreement" between Chapter 13 Debtors and their attorney as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I/We understand more than one Attorney or office personal will work on my/our case.

I/We understand the court cost of \$310.00 is not included in attorney fees. I/We also understand the cost for the credit counseling or financial management classes are not included in the attorney fees. I/We understand that if the filing fees are in installments they will be paid directly to the Clerk of the U.S. Bankruptcy Court. Attorney fees are fixed, but the attorney may apply to the court for additional fees allowed by the "Court Approved Retention Agreement" or other circumstances, such as any Adversary proceedings. If additional fees are awarded they will be paid by the Chapter 13 trustee unless the agreement is to pay them up front. Fees and "advance payment retainers" for pre-filing work and pre-confirmation work, become property of this firm on payment and are deposited into the firm's operating account. Payments are applied to the fees. If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I/We close my file or breach this contract I agree to pay for the work done to that time. I/We assign to my/our attorney all amount tendered as filing fees or court cost and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me/us if case is not filed.

Balsley & Dahlberg Law Office is not representing me/us in state or any other courts regarding creditors in my/our bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankruptcy is my/our responsibility I/we must disclose any such claims or property I/we now have or acquire after filing Chapter 13 to my attorney and the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.

The plan payment is estimated to be \$ \_\_261.00\_ per month. The payment and length of the plan are based on the information I/we provided and is based on my/our income, expenses, assets and debts. If these amounts are not accurate, my/our plan payment or length of my/our plan may need to be increased. I/We further understand that if my/our income or expenses change during the Chapter 13, the plan payment may have to change. I/We agree to read my petition and plan before signing it so that I/we know what is included. (Please initial on red line below)

If I/We have any of the following debts the will NOT be discharged if they are not paid in full: traffic/parking/tollway fines; criminal fines; student loans; educational debts/tuition; child support/maintenance; taxes; NSF criminal court; debts incurred by fraud or other debts found non-dischargeable by the Bankruptcy Court, and the holder of these will be free to pursue collection after the entry of the discharge order.

If I/We are eligible to receive a tax refund during the Chapter 13, I/We understand that I/we must turn it over to the Chapter 13 Trustee unless specifically advised that I/we do not need to. I/We understand this may change on a yearly basis, so I/we must check with the attorney's office every year. I/We will need to provide the attorney with a copy of my/our Federal & State Taxes after they have been filed.

I/We also understand that if I/we received any sum of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I /we MUST notify the attorney immediately and may have to pay some or all of the funds into the Chapter 13.

I/We understand that if a motion needs to be filed to Modify my Chapter 13 Plan including a motion to incur, motion to suspend or reduce payments in my/our case I/we may have to pay the postage and any other fees associated with the filing of the motion..

I/We cannot transfer any property or incur any credit or debt without the express permission of my/our attorney or the Court, and I/we must make full disclosure of all income, expenses, debts, and assets in my/our initial consultation and on my bankruptcy petition. If I/We fail to remain current in a domestic support obligation, fail to certify to the Court that I/We have remained current, or if I/we fail to take my financial management class that my case may be closed without discharge, and I/we well be required to pay a fee to have it reopened.

Oranger, Orbitor

erg, Attorney for Debto

Dahlb

Dated: 9-22-16

Joint Debtor

Case 16-82012 Doc 1 Filed 08/24/16 Entered 08/24/16 11:00:52 Desc Main Document Page 47 of 48

#### **United States Bankruptcy Court** Northern District of Illinois

In re	Cynthia L. Orander		Case No.	
		Debtor(s)	Chapter 13	
	VERI	IFICATION OF CREDITOR MA	ATRIX	
	Number of Creditors:			9
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credito	rs is true and correct to t	he best of my
Date:	August 22, 2016	/s/ Cynthia L. Orander Cynthia L. Orander Signature of Debtor		

Alliance Pathology Consultants 8085 Rivers Avenue, #100 Charleston, SC 29406-9239

Green Bank N.A. d/b/a MyPay 4000 Greenbriar Houston, TX 77098

Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service 1240 E. 9th Street, Room 493 Cleveland, OH 44199

James Gerdes 2807 Ridgeway Avenue Rockford, IL 61101

Malcom S. Gerald & Associates, Inc. P.O. Box 1259 Sept. #126943 Oaks, PA 19456

McCarthy, Burgess & Wolfe The MB&W Building 26000 Cannon Road Bedford, OH 44146

Opportunity Financial LLC 11 E. Adams Street, Suite 501 Chicago, IL 60603

RMH Pathologists LTD c/o Professional Billing 6785 Weaver Road # D Rockford, IL 61114